

ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA

County Of Maricopa

} ss

CERTIFICATE NO. -35-

DOCKET NO. EMS 3033

THE ARIZONA DEPARTMENT OF HEALTH SERVICES has found, under the authority of A.R.S. §36-2232 et seq. and pursuant to Department of Health Services rules, that public necessity requires the operation of

TRI-VALLEY AMBULANCE SERVICE, INC.

as a ground ALS and BLS ambulance service in the State of Arizona for the transportation of individuals who are sick, injured, wounded or otherwise incapacitated or helpless within the following service area, with the following central operations station and response times:

1. Service Area: Town of Wellton, and the following boundaries: On the South, Luke Air Force Range; on the West, from Luke Air Force Range, then north to I-8 to Milepost 21, then further north to Yuma Proving Ground boundaries and all of Dome Valley to U.S. Highway 95, then following Yuma Proving Ground boundary in northeasterly direction, then east on line to the Yuma/Maricopa County line, including Hyder; on the East, Maricopa County line south to Luke Air Force Range.
2. Central Operations Station: Wellton, Arizona (29118 Los Angeles Avenue).
3. Response Times:
 - a. Five (5) minutes on twenty-five (25) percent of all calls.
 - b. Ten (10) minutes on fifty (50) percent of all calls.
 - c. Twenty (20) minutes on seventy-five (75) percent of all calls.
 - d. Fifty-five (55) minutes on one hundred (100) percent of all calls due to responses to Hyder area, Maricopa County line and remote areas of our C.O.N.

Now, therefore, by virtue of the authority vested in the Arizona Department of Health Services, under the constitution and laws of the State of Arizona, does hereby grant this

RENEWAL

CERTIFICATE OF NECESSITY

authorizing the operation of the aforesaid ambulance service for a period ending February 28, 2010 unless for cause sooner amended, suspended, revoked or terminated subject to the decisions and orders, and rules of the Department.

PROVIDED, that this certificate shall not be assigned nor transferred unless authorized by the Arizona Department of Health Services.



BY THE ORDER OF THE ARIZONA DEPARTMENT OF HEALTH SERVICES, IN

WITNESS WHEREOF, I SUSAN GERARD
the Director of the Arizona Department of Health Services, have hereunto set my hand and caused the official seal of the Arizona Department of Health Services to be affixed at Phoenix, Arizona on 2-8-07

DIRECTOR

TO BE FRAMED AND DISPLAYED IN A CONSPICUOUS PLACE